Attorney Docket No.: 451194-092

DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled:

EXTENDED RELEASE SYSTEMS FOR MACROLIDE ANTIBIOTICS

describe	d and claimed	
<u>X</u>	in the attached specification;	
	in the specification filed	,
	as U.S. Application Serial No	
	and as amended	
-	state that I have reviewed and understanation, including the claims as filed and as	d the contents of the above identified amended by any amendment referred to
	wledge the duty to disclose information v in Title 37, Code of Federal Regulations	<u>-</u>
	PRIORITY C	LAIM
	claim the benefit under Title 35, United rovisional application(s) listed below.	States Code, §119(e) of any United
	451194-092-P	July 2, 2003
-	Atty. Docket No.	Filing Date
	Application No.	Filing Date
Send Co	orrespondence To:	
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Docket No. 451194-092

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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